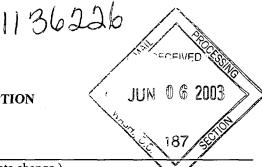
SECURITIES AND EXCHANGE COMMISSION WASHINGTON, DC 20549



FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION



Name of Offering (Check if this is an a	mendment and name has changed, and indic	cate change.)
LFE Capital Fund I		
Filing Under (Check box(es) that apply):	Rule 504 Rule 505 Rul	e 506 Section 4(6) ULOE
Type of Filing: New Filing	Amendment	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the	ne issuer:	
Name of Issuer (Check if this is an ame	endment and the name has changed and indic	cate change.)
LFE Capital Fund I, LLC		
Address of Executive Offices	(Number and Street, City, State, Zip	Telephone Number (Including Area Code)
	Code)	
1350 Peavey Suites, 730 Second Avenue	South, Minneapolis, MN 55402	(612) 752-1809
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from executive offices) San	me as above.	Same as above.
Brief Description of Business		
Capital investment fund		
Type of Business Organization		
Filing Under (Check box(es) that apply):		
		Company
business trust	limited partnership, to be formed	
	Month Year	(I II N 0 9 2003
Actual or Estimated Date of Incorporation		
Jurisdiction of Incorporation or Organization	on: (Enter two-letter U.S. Postal Service abl	breviation for state; M N THOWSON
		- PARATEUR

GENERAL INSTRUCTIONS

Federal.

Who Must File. All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File. A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File. U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, DC 20549.

Copies Required. Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required. A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee. There is no federal filing fee.

State.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a lost of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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	A. BASIC IDENTII	FICATION DATA		
2. Enter the information requested for the fo	llowing:			
• Each promoter of the issuer, if the iss	suer has been organize	ed within the past five y	ears;	
 Each beneficial owner having the po- of equity securities of the issuer; 	wer to vote or dispose	, or direct the vote or di	sposition of, 10 per	rcent or more of a class
 Each executive officer and director o issuers; and 	f the corporate issuers	s and of corporate gener	al and managing pa	artners of partnership
Each general and managing partner compared to the second sec	f partnership issuers.			
Check Box(es) that Apply:	Beneficial Owner		☑ Director	General and/or Managing Partner
Full Name (last name first, if individual) Frecon, Leslie				
Business or Residence Address (number and s 1350 Peavey Suites, 730 Second Avenue Sou				
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (last name first, if individual) L. Frecon Enterprises, LLC				
Business or Residence Address (number and s 1350 Peavey Suites, 730 Second Avenue Sou				
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (last name first, if individual)				
Business or Residence Address (number and s	treet, city, state, zip c	ode)		<u> </u>
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (last name first, if individual)				
Business or Residence Address (number and s	treet, city, state, zip c	ode)		
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (last name first, if individual)				
Business or Residence Address (number and s	treet, city, state, zip c	ode)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (last name first, if individual)				
Business or Residence Address (number and s	treet, city, state, zip c	ode)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Full Name (last name first, if individual)

Business or Residence Address (number and street, city, state, zip code)

				D IN	IEODMA	TION AD	OUT OFF	EDING				
				В. П	IFURNIA	HON AB	OUT OFF	ERING		_	Yes	s No
1. Ha	s the issuer	sold, or d	loes the iss	uer intend	to sell, to r	non-accred	ited invest	ors in this	offering?	•••••		
			nvestment t							\$	250,000	*
individ	al? *but sm	aller amount	ts may be acc	epted in the d	liscretion of t	he company						
											Yes	s No
3. Do	es the offer	ring permi	t joint own	ership of a	single uni	it?	•••••				🖂	
				-			_	_		y or indire	• .	
										of securities stered with		
SE	C and/or w	ith a state	or states, l	ist the nan	ne of the b	roker or de	aler. If m	ore than fi	ve (5) pers	ons to be li	sted	
		l persons	of such a b	proker or o	lealer, you	may set i	forth the ir	nformation	for that b	roker or de	ealer	
onl	<u> </u>	6 :	<u> </u>									
	me (last na l ot applica		f individua	1)								
			ess (numbe	er and stree	et city stat	te zin code	(9				<u> </u>	
2401110			• • • • • • • • • • • • • • • • • • • •		,,	,p	-,					
Name o	f Associate	ed Broker	or Dealer									
			d Has Soli									
(Check States	"All States	or check	c individua	l states)			••••••				Ц	All
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN] f individua	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Tun Iva	ilic (last lia	me mst, i	i ilidividua	1)								
Busines	s or Reside	ence Addr	ess (numbe	r and stree	et, city, stat	te, zip code	e)					
Name o	f Associate	ed Broker	or Dealer									
			1 77 0 1			11 1 2 2 1					·	
			ed Has Soli								 1	A 11
States	All States	of check	Cilidividua	states)					*****************		Ц	All
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
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	`			•								
Busines	s or Reside	ence Addre	ess (numbe	r and stree	t, city, stat	e, zip code	e)					
Name o	f Associate	ed Broker	or Dealer								4	
States in	Which De	rcon Lista	d Has Soli	cited or In	tends to Sc	ligit Durch	nacera					
												All
States		J. OHOUR		. 202000,1111							ب	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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[MT] [RI]	[NE] [SC]	[NV] [SD]	[NI] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[WA]	[WV]	[OK] [WI]	[WY]	[PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AN	D USE OF PRO	OCE	<u>DS</u>	S
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "O" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate			Amount
	Type of Security Debt\$	Aggregate Offering Pri		\$	Already Sold
	Equity - Membership Interests \$	10,150,000		\$ -	10,150,000
	Common Preferred		_	_	10,100,000
	Convertible Securities (including warrants)			\$	
	Partnership Interests			\$ _	
	Other (Specify)\$			\$ _	
	Total\$	10,150,000		\$_	10,150,000
	Answer also in Appendix, column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "O" if answer is "none" or "zero."				Aggregate
	Accredited Investors	Number of Investors			Dollar Amount of Purchases
	Non-accredited Investors	$\frac{73}{0}$		\$ \$	10,150,000
	Total (for filings under Rule 504 only)			<u> </u>	
	Answer also in Appendix, column 4, if filing under ULOE.		`	_	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of			Dollar
	Type of Offering	Security			Amount Sold
	Rule 505		:	§ _	
	Regulation A			§ _	
	Rule 504		}	\$ _	
	Total			-	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs			\$ -	0
	Legal Fees.		\boxtimes	<u> </u>	10,000
	Accounting Fees			\$ -	0
	Engineering Fees			<u> </u>	0
	Sales Commissions (specify finders' fees separately)			<u> </u>	0
	Other Expenses (identify)			Ţ -	
	Total		=	♪ }	
	1040	••••••	، لاکا	v	
	b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question			r	10 140 000
	4.a. This difference is the "adjusted gross proceeds to the issuer."		•	§ _	10,140,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b. above. Payments to Officers, Directors, & Payments to **Affiliates** Others Salaries and fees □ \$ □ \$ 0 □ s Purchase of real estate Purchase, rental or leasing and installation of machinery and equipment..... 0 0 0 Construction or leasing of plant buildings and facilities \$ 0 □ \$ Acquisition of other businesses (including the value of securities \$ 0 □ \$ 0 involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) Repayment of indebtedness..... Working capital 0 □ \$ Other (specify) Investment Capital ☒ \$ 10.140.000 □ \$ □ \$ Column Totals..... **⊠** \$ \$ 10,140,000 Total Payments Listed (column totals added)..... \boxtimes \$ 10,140,000 D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Signature Date

ATTENTION

President

Title of Signer (Print or Type)

LFE Capital Fund I, LLC

Leslie Frecon

Name of Signer (Print or Type)

May 29,2003

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 16 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	YES	NO
	See Appendix, column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrator, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
LFE Capital Fund I, LLC	Volie Flew	May $\frac{29}{2}$, 2003
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Leslie Frecon	President	

Instruction: Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend To I Accre Inves	To Sell Non- edited stor In ate -Item1)	3 Type Of Security And Aggregate Offering Price Offered In State (Part C-Item 1)	4 Type of Investor And Amount Purchased In State (Part C-Item 2)			5 Disqualification under State ULOE (If Yes, Attach Explanation Of Waiver Granted) (Part E-Item 1)		
State	Yes	No	Preferred Stock	Number Of Accredited Investors	Amount	Number Of Non- Accredited Investors	Amount	Yes	No
AL									_
AK									
AZ		X	Membership Interests	1	\$25,000				
AR									
CA		X	Membership Interests	2	\$1,050,000				
СО									
СТ		Х	Membership Interests	2	\$200,000				
DE									
DC									
FL		X	Membership Interests	2	\$375,000				
GA									
HI									
ID									
IL		X	Membership Interests	5	\$375,000				
IN									
IA									
KS									
KY									
LA									
ME									,
MD									
MA		X	Membership Interests	1	\$25,000				
MI									
MN		X	Membership Interests	54	\$7,025,000				
MS									
МО		Х	Membership Interests	1	\$125,000				

APPENDIX

1	2 3 Intend To Sell Type Of Security And Aggregate Offering Price				5 Disqualification under State ULOE (If Yes,				
	Accr Inves	edited stor In ate	Offered In State (Part C-Item 1)	Type of In	Type of Investor And Amount Purchased In State (Part C-Item 2)				
State	Yes	No	Preferred Stock	Number Of Accredited Investors	Amount	Number Of Non- Accredited Investors	Amount	Yes	No
MT									
NE									
NV									
NH							-		
NJ		X	Membership Interests	1	\$25,000		·	-	
NM									
NY		X	Membership Interests	2	\$300,000		-		
NC	-								
ND		-							
ОН									
OK									
OR					***************************************		-		
PA									
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA									
WA									
WV									
WI									
WY		Х	Membership Interests	1	\$500,000				
PR									